Vision Group E Access

"Alternate Access" September 5, 2002

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This report is intended to present research and analysis of the California Emergency Medical Services Authority (EMSA) Vision Access Objectives #6 and #7 "Alternate Access" and to report that these objectives have been or are in the process of being met.

In 1997, California began a process to develop statewide goals for the improvement of Emergency Medical Services. Following a December 1999 conference, six committees, including Finance, Governance and Medical Control, Education and Personnel, System Evaluation and Improvement, Access, Prevention and Public Education were formed to address the sixty-six objectives identified at the conference.

Originally, eight objectives were assigned to the Access Committee, including:

- ? Objective 6. Integration of alternate (non-911) access should be developed in all universal access systems.
- ? Objective 7. Consider a new universal statewide non-911 (i.e., 311) number staffed by personnel trained at the same level as 911.

Through the course of the Vision project, these objectives were refined and by the time the follow-up conference, "EMS Vision 2000: Integrating the Pieces," was held in November 2000, the original Objective 6 and 7 had been integrated into a revised set of nine objectives.

COMMITTEE POSITION

- An "N11" alternate to the existing emergency 911universal access system shall <u>not</u> be used for Emergency Medical Services. While there may be a compelling need for an "N11"non-emergency alternate number for law enforcement and/or government services, use of those numbers for medical requests is inconsistent with the purpose of Emergency Medical Dispatching.
- 2. Wherever an alternate access number exists for other public services, policies and procedures should be in place to redirect calls/callers to the emergency 911 universal access system if appropriate.
- 3. Facilities managing alternate access numbers should ensure that their personnel receive awareness level training in the EMS/public safety resources in their service area.

METHODOLOGY

"Alternate access" was defined as a means of contacting a PSAP by the public (or other non-public safety entity) for the purpose of eliciting an emergency medical services response, by use of seven-digit or three-digit numbers other than 911.

The sub-committee members reviewed the following in formulating their recommendations: the Vision Access Committee's "Universal Access to 911" position paper; Department of General Services Report to the Governor and Legislature on Non-Emergency Number Pilot Programs (11/00), 211.org Website, and current state / federal statutes, regulations and rules.

SIGNIFICANT FINDINGS

- 1. Seven-digit alternate access numbers currently exist within every PSAP. This alternate access is an integral component of a PSAP, and should be considered to be part of the emergency 911 universal access system, offering the same level and type of services as provided to those who dialed 911.
- Abbreviated dialing codes (referred to as "N11"), enable callers to connect to a
 location in the phone network that otherwise would be accessible only via a seven or
 ten-digit telephone number. The network must be pre-programmed to translate the
 three-digit code into the appropriate seven or ten-digit telephone number and route the
 call accordingly.
- 3. Following are the FCC's existing N11 code assignments:
 - 2-1-1: Assigned for community information and referral services
 - 3-1-1: Assigned nationwide for non-emergency police and other government services
 - 4-1-1: Unassigned, but used virtually nationwide by carriers for directory assistance
 - 5-1-1: Assigned for traffic and transportation information
 - 6-1-1: Unassigned, but used broadly by carriers for repair service
 - 7-1-1: Assigned nationwide for access to Telecom Relay Services
 - 8-1-1: Unassigned, but used by local exchanged carriers for business office use
 - 9-1-1: Universal emergency number for wireline and wireless telephone service per Wireless Communications and Public Safety Act of 1999
- 4. Although not intended to serve as an alternate access, there are a number of entities, including non-emergency ambulance services, access management, and other health and social services that have an increased likelihood of encountering a call that should otherwise have been handled by the community's universal access system.

RECOMMENDATION

The Vision Access "Alternate Access" subcommittee recommends the adoption of this position paper.